SCS

WHAT WE EAT IN AMERICA
SCREENER

INTERVIEWER NAME: _____

INTERVIEWER ID: |___|___|___|

CASE #: _____

ADDRESS: _____

_____

DATE OF
SCREENER: |__|__|-|__|__|-19 |__|__|
          MO   DAY   YR

MISSED STRUCTURE: _____ YES _____ NO

MISSED DU: _____ YES _____ NO

RESPONDENT'S
FIRST NAME: _____

LINE LETTER: |___| IF APPLICABLE

CONTACT DAYS _____ _____ _____

SAMPLE MESSAGE: _____

DISPOSITION CODE: _____

|__|__|:|__|__| AM...................... 1
TIME START   PM...................... 2

|__|__|:|__|__| AM...................... 1
TIME ENDED   PM...................... 2

INTRODUCTION: Hello, I'm (YOUR NAME) and we are conducting a survey for the United States Department of Agriculture. A letter and brochure were sent to you recently explaining the What We Eat in America Survey which is about what people eat and drink. (IF RESIDENT DOES NOT REMEMBER, HAND NEW COPY OF LETTER AND BROCHURE.)

First, I would like to verify your address. Is this (READ ADDRESS FROM LABEL ABOVE)? [MAKE CORRECTIONS TO ADDRESS LABEL IF NECESSARY. IF AT CORRECT ADDRESS, CONTINUE WITH SCREENER. IF NOT AT CORRECT ADDRESS, THANK RESPONDENT AND LEAVE.]

I need to determine if any members of your household are eligible to participate. To do this, I'd like to ask some questions about the persons who live here. Each eligible household that agrees to participate will receive a gift. Before we begin, I want to assure you that your answers will be combined with answers from other households to make totals and averages, in which no person or family will be identified.

RECORD OF SCREENER CALLS						
Attempt	Int ID	Day	Date	Time	Result	Comment
1						
2						
3						
4						
5						
6						

FOR HOME OFFICE USE ONLY
Q14___ H47___ MORE.....1 LESS.....2
DATE RECEIVED: _____
VERIFIER ID: _____
MC: _____ YES _____ NO
BATCH #: _____

1A. How many children ages birth through nine years live in this household? |___|___| IF ZERO, SKIP TO Q15A
NUMBER

1B. How many people ten years old or older live in this household? |___|___|
NUMBER

1C. CONFIRM: So there are |___|___| people living in this household, is that correct? IF YES, CONTINUE
NUMBER IF NO, REASK 1A AND 1B

2. What is the first name of the person or one of the persons who owns or rents this home?
[ENTER NAME ON LINE A OF ENUMERATION TABLE BELOW.]

3. What is the first name of (REFERENCE PERSON)'s spouse, if any, who lives in this household?
[ENTER NAME ON LINE B OF ENUMERATION TABLE BELOW.]

ENUMERATION TABLE: AFTER LISTING HOUSEHOLD MEMBERS, RECORD NAME AND LINE LETTER OF SCREENER RESPONDENT ON FRONT COVER. ASK QUESTIONS 8 - 13 GOING ACROSS FOR EACH PERSON.

LINE LTR	ENUMERATION QUESTIONS 2-7: FIRST NAME	8. What is (NAME)'s relationship to (REFERENCE PERSON)?	9. HAND CARD S1 — Which of the groups on this card best describes (NAME)'s race?	
A		REFERENCE PERSON |0|0|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5
B		REFERENCE PERSON |__|__|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5
C		REFERENCE PERSON |__|__|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5
D		REFERENCE PERSON |__|__|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5
E		REFERENCE PERSON |__|__|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5
F		REFERENCE PERSON |__|__|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5
G		REFERENCE PERSON |__|__|	WHITE........................ 1 BLACK........................ 2 ASIAN........................ 3	AM. INDIAN................ 4 OTHER....................... 5

4. And the other members of this household who are related to (REFERENCE PERSON). What are their first names? Let's begin with the oldest.
[ENTER NAME(S) IN AGE ORDER ON ENUMERATION TABLE BELOW.]

5. Are there any other people living here who are not related to (REFERENCE PERSON)?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW]

6. [I have listed (READ ALL NAMES).] Is there anyone else living here now, such as friends, relatives, or roomers?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW.]

7. Have we missed other household members now away from home who usually live here, for example, someone away on vacation or business, in a hospital, or a student living in a dormitory, fraternity, or sorority?
[IF YES, ENTER NAME(S) ON ENUMERATION TABLE BELOW.]

10. HAND CARD S2 Does any of the groups on this card represent (NAME)'s national origin?	11. How old was (NAME) on (his/her) last birthday?) IF LESS THAN 1, RECORD AGE IN MONTHS.	12. ASK FOR CHILDREN 9 AND UNDER. FOR ALL OTHERS, SKIP TO Q13. What is (NAME)'s date of birth? (MM/DD/ YYYY)	13. CODE SEX. (ASK IF NOT OBVIOUS: Is (NAME) male or female?)	SAMPLE PERSON (SP) COLUMN	
				✓	NUMBER
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|
MEXICAN ....1 OTHER SPANISH/ PUERTO RICAN ....2 HISPANIC ....4 CUBAN...................3 NONE OF ABOVE......5	|__|__|__| YEARS OR |_0_|__|__| MONTHS	|__|__|/|__|__| |__|__|__|__|	MALE ...... 1 FEMALE .. 2		|__|__|

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│                                                            │
│                         BOX 1                              │
│                                                            │
│                                              ┌───┐         │
│            SAMPLING MESSAGE WILL BE PRINTED HERE   |___|    │
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14. | HAND CARD S3 | SELECT CARD FOR NUMBER OF HOUSEHOLD MEMBERS. CARD SELECTED = S3-|__|__|. Here is a card showing different sources from which households may receive income. Please think for a moment about the various sources from which the members of this household received income last year -- during **1997**.

Thinking about all of the sources of income, please tell me whether the total income received by the members of this household during 1997 was more or less than the amount at the bottom of this card.

MORE...............................	1	(BOX 3)
LESS	2	(BOX 2) ———————→
REFUSED	3	14a
DON'T KNOW	4	

<div style="float:right; border:1px solid; padding:5px;">
BOX 2.
SP SELECTION

PLACE A CHECK MARK IN SP COLUMN FOR EACH PERSON IN AGE AND SEX CATEGORY MARKED YES IN BOX 1. THEN GO TO BOX 3.
</div>

14a. ARE THERE ANY CHILDREN LESS THAN 6 YEARS OF AGE?

YES.........................	1	(Q14b)
NO	2	(BOX 3)

14b. IS THERE A MALE 18 YEARS OF AGE OR OLDER?

YES.........................	1	(BOX 3)
NO	2	(BOX 2) ———————→

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│                                                            │
│                         BOX 3                              │
│                                                            │
│                                                            │
│            SAMPLING MESSAGE WILL BE PRINTED HERE           │
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│                   BOX 4.  SP SELECTION                     │
│                                                            │
│ PLACE A CHECK MARK IN SP COLUMN FOR EACH PERSON IN AGE AND SEX CATEGORY │
│ MARKED YES IN BOX 3.  THEN GO TO BOX 5.                    │
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│              BOX 5.  ENUMERATION TABLE REVIEW              │
│                                                            │
│ ASSIGN SEQUENTIAL SP NUMBERS TO EACH PERSON WITH A CHECK MARK IN SP COLUMN. │
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15A.   Would you give me your telephone number in case my office wants to check my work?

TELEPHONE NUMBER: (_____) _____

NO TELEPHONE.. 2
REFUSED.. 7

WAS ANY SAMPLE PERSON SELECTED?
YES.. 1 (Q16)
NO.. 2 (Q15B)

15B.   May I please have your first name? RECORD NAME ON SCREENER COVER. SKIP TO 19

16.   Are you or any members of this household planning to move within the next 6 weeks?

YES 1 (Q17)
NO 2 (Q19)

17.   When are (you/he/she/they) planning to move?

_____
MONTH

RECORD ANY AVAILABLE ADDRESS INFORMATION:

_____

_____

18.   Please give me the name and telephone number of two relatives or friends who would know where the members of your household could be reached in case we have trouble reaching you. Please give me the names of persons who are not currently living in the household.

NAME #1: _____

TELEPHONE NUMBER: (_____) _____ |___|

NAME #2: _____

TELEPHONE NUMBER: (_____) _____

19.	DOES THE SCREENER LABEL REQUIRE THE MISSED DU PROCEDURE?

1 O YES   2 O NO |___|

- COMPLETE MISSED DU PROCEDURE AND FORM NOW. THEN:
- IF SP SELECTED, CONTINUE WITH HH QUESTIONNAIRE.
- IF NO SP SELECTED, TERMINATE.

- IF SP SELECTED, CONTINUE WITH HH QUESTIONNAIRE.
- IF NO SP SELECTED, TERMINATE.

TIME ENDED_____ AM
PM

MISSED DU PROCEDURE

A MISSED DU IS A UNIT <u>WITHIN</u> OR <u>ATTACHED</u> TO THE STRUCTURE IN WHICH THE SAMPLED DU IS LOCATED, SUCH AS A BASEMENT OR ATTIC APARTMENT OR AN APARTMENT OVER AN ATTACHED GARAGE. IT MAY ALSO BE AN APARTMENT WITHIN A MULTI UNIT STRUCTURE.

> IF TWO OR MORE UNITS AT THIS ADDRESS (FOR EXAMPLE, AN APARTMENT BUILDING), SKIP TO STEP 2; OTHERWISE, BEGIN WITH STEP 1.

1. AFTER COMPLETING SCREENER, SAY: We want to be sure that every household in this area has been given a chance to participate in this important survey. Are there any other living quarters at this address such as basement or attic apartments that we may have missed?

2. CHECK IN THE LOBBY AND AROUND THE OUTSIDE OF THIS (HOUSE/BUILDING) FOR ADDITIONAL UNITS OR ENTRANCES TO THIS ADDRESS.

3. RECORD DISCOVERED DUs ON FORM BELOW. NUMBER DISCOVERED DUs SEQUENTIALLY WITHIN SEGMENTS BEGINNING WITH DU NUMBER 601. EACH NUMBER MUST BE ASSIGNED ONLY <u>ONCE</u> WITHIN A SEGMENT. IF NO ADDITIONAL DUs, CHECK THE CIRCLE IN THE UPPER LEFT-HAND CORNER OF THE FORM.

4. IF <u>1 TO 4</u> MISSED DUs ARE DISCOVERED, FILL OUT AN ASSIGNMENT BOX ON A BLANK SCREENER FOR EACH (INSTRUCTIONS FOR HOW TO DO THIS ARE IN THE INTERVIEWER MANUAL) AND CONDUCT SCREENER INTERVIEW. ADD THE DISCOVERED DUs TO A NEW LISTING SHEET AND TO ALL COPIES OF THE INTERVIEWER REPORTS.

5. IF <u>5 OR MORE</u> DUs ARE DISCOVERED, CALL SUPERVISOR FOR INSTRUCTIONS BEFORE YOU DO ANY ADDITIONAL SCREENER INTERVIEWS. ADD ALL OF THE DISCOVERED DUs TO A NEW LISTING SHEET AND THE <u>SELECTED</u> SAMPLE DUs TO ALL COPIES OF THE INTERVIEWER REPORTS. THEN FILL OUT AN ASSIGNMENT BOX ON A BLANK SCREENER FOR EACH <u>SELECTED</u> SAMPLE DU AND CONDUCT SCREENER INTERVIEW.

MISSED DU FORM

CHECK (√) IF NO MISSED DU AT SAMPLED STRUCTURE: O   PSU # _____   SEG # _____

DU # ASSIGNED	ADDRESS OF DISCOVERED DU

	TOTAL ADDITIONAL DUs

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│                       BOX 6                           │
│                                                       │
│         SAMPLING MESSAGE WILL BE PRINTED HERE         │
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20. ARE THERE ANY CHILDREN LESS THAN 6 YEARS OF AGE?

                    YES......................... 1   (Q21)
                    NO 2   (BOX 8)

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│                BOX 7.                  │
│  ■  IF ONE OR MORE PERSONS IN          │
│     AGE AND SEX  CATEGORIES IN         │
│     BOX 6, RECORD AGE AND SEX IN       │
│     SP CHART BELOW.  THEN GO TO        │
│     BOX 8.                             │
│  ■  IF NO PERSONS IN AGE AND SEX       │
│     CATEGORIES IN BOX 6, GO TO         │
│     BOX 8.                             │
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21. IS THERE A MALE 18 YEARS OF AGE OR OLDER?

                    YES......................... 1   (BOX 8)
                    NO 2   (BOX 7) ⟶

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│                       BOX 8                           │
│                                                       │
│         SAMPLING MESSAGE WILL BE PRINTED HERE         │
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│                                                       │
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BOX 9. SAMPLE PERSON SELECTION
RECORD AGE AND SEX IN SAMPLE PERSON CHART BELOW FOR EACH PERSON IN AGE AND SEX CATEGORY IN BOX 8.

SAMPLE PERSON (SP) CHART		
AGE OR AGE RANGE	SEX	SAMPLE PERSON

BOX 10. ASSIGNING SP NUMBERS
RECORD SEQUENTIAL SAMPLE PERSON NUMBER FOR EACH PERSON RECORDED IN SAMPLE PERSON CHART ABOVE.

RECORD NAME, ADDRESS, AND TELEPHONE NUMBER OF THE INDIVIDUALS PROVIDING THIS INFORMATION.

1. _____

2. _____